

**UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)**

**Charitta Burt, Paralegal**

U. S. Application No. 10/501735  
Publication Date 7.31.03  
Publication No. WO 03/02497 PCT/RO/101  
International Application No. PCT AU03/00086 Language Eng  
Priority Info: Country AU No. PS 0159 date 1.25.02 MORE turn over  
Abstract: \_\_\_\_\_, Correspondence checked: 24257; Inventor Name checked: F Wayne Keith  
Copy in International Application: yes ☒ no \_\_\_\_\_; Translation: yes \_\_\_\_\_ no \_\_\_\_\_ L WEBB  
Inventor Residence: city Railway East country AU/AU  
Copy of ISR AUX, Copy of IPER AUX  
Total Claims: 26 Chargeable 26 Independent 2 multiple 16  
371 Filing Fees: 9; meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_  
Number of drawing Sheets: 2 Foreign language: yes \_\_\_\_\_  
Oath/Declaration: yes ☒ no \_\_\_\_\_; signed ☒ unsigned \_\_\_\_\_ defective \_\_\_\_\_ completed 7.16.04  
Small entity fee: 1030 SME papers: yes \_\_\_\_\_ no \_\_\_\_\_  
Biochemical Seq. Diskette: yes \_\_\_\_\_ no ☒ entered \_\_\_\_\_ Biochemical Seq. Listing: yes \_\_\_\_\_ no \_\_\_\_\_  
statement \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ Error report mailed \_\_\_\_\_  
Copy of ISR: with References \_\_\_\_\_, without References ☒  
Copy of IPER: yes ☒ no \_\_\_\_\_; Annexes yes ☒ no \_\_\_\_\_ entered ☒ not entered \_\_\_\_\_  
Preliminary Amendment(s): yes ☒ no \_\_\_\_\_; 2<sup>nd</sup> amendment date \_\_\_\_\_  
IDS: yes ☒ no \_\_\_\_\_ DATE: 7.16.04 2<sup>nd</sup> yes \_\_\_\_\_ no ☒ DATE \_\_\_\_\_  
Request for Immediate Examination: yes \_\_\_\_\_ no ☒  
Substitute Specification: yes \_\_\_\_\_ no ☒  
Assignment: yes \_\_\_\_\_ no ☒ forwarded to Assignment \_\_\_\_\_  
Priority Document(s): yes ☒ no ☒; Number of copies included 1  
Power of Attorney: yes \_\_\_\_\_ no ☒  
Date of 35 USC Receipt of Request: 7.16.04 Notes: \_\_\_\_\_  
Date Completion USC 371 Requirements: 7.16.04  
Notice of Missing Requirements: \_\_\_\_\_  
Notice of Defective Response: \_\_\_\_\_  
Notice of Acceptance: 03.2.05  
Notice of Abandonment: \_\_\_\_\_  
Other forms: \_\_\_\_\_  
Article 19 Amendment: yes \_\_\_\_\_ no \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_  
Extension of time: Number of months \_\_\_\_\_  
Petition to Revive: \_\_\_\_\_; Petition 1.47: \_\_\_\_\_  
Data Sheet: yes \_\_\_\_\_ no \_\_\_\_\_